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Substitute for form 1449/PTO	Application Number			
INFORMATION DISCLOSURE	Filing Date			
	First Named Inventor	David W. Heekė		
STATEMENT BY APPLICANT	Art Unit			
(Use as many sheets as necessary)	Examiner Name			
Sheet 1 of 2	Attorney Docket Number	HDW102C		

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Examiner Initials*	No.1	No.1 Document Number Publication Date MM-DD-YYYY Number-Kind Code ² (* Incomp)	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear
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Examiner Signature	/Annette Dixon/	(10/24/2006)	Date Considered	

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